

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Libertarian National Committee

ADDRESS (number and street)

2600 Virginia Ave NW

Suite 100

☐Check if different
than previously
reported. (ACC)

Washington

DC

20037

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00255695

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2006

through

01

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

NEL1 - David Mark Nelson

Signature of Treasurer

Electronically Filed by NEL1 - David Mark Nelson

Date

02

28

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Libertarian National Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		-14339.51
(b) Cash on Hand at Beginning of Reporting Period	-14339.51	
(c) Total Receipts (from Line 19)	92635.37	92635.37
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	78295.86	78295.86
7. Total Disbursements (from Line 31)	67509.64	67509.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10786.22	10786.22
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	45.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	139525.06	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Libertarian National Committee

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	17702.00	17702.00
(ii) Unitemized	73535.87	73535.87
(iii) TOTAL (add Lines 11(a)(i) and (ii)	91237.87	91237.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	300.00	300.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	91537.87	91537.87
12. Transfers From Affiliated/Other Party Committees	1097.50	1097.50
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	92635.37	92635.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	92635.37	92635.37

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	67509.64	67509.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	67509.64	67509.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	67509.64	67509.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	67509.64	67509.64

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	91537.87	91537.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	91537.87	91537.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	67509.64	67509.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	67509.64	67509.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)

Mett B Ausley

Mailing Address 3412 Waccamaw Shores Rd

City State Zip Code
 Lake Waccamaw NC 28450-9442

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cypress Pathology

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.178020

Amount of Each Receipt this Period

300.00

Contribution

B. Full Name (Last, First, Middle Initial)

Frank Bond

Mailing Address 9690 Deereco Rd

City State Zip Code
 Timonium MD 21093-6991

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.179685

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)

Jeffrey Brindle

Mailing Address 2701 Sioux Conifer Rd

City State Zip Code
 Watertown SD 57201-7520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 9 / 2 0 0 6

Transaction ID: SA11A1.180153

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Allen E Chantelois

Mailing Address 5555 N Meade St

City State Zip Code
 Appleton WI 54913-8382

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHN

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.177947

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Harold W Cheney

Mailing Address 300 Pingree Dr

City State Zip Code
 Worthington OH 43085-4039

FEC ID number of contributing
federal political committee.

C

Name of Employer
OCLC

Occupation
Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.178559

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Bruce Cohen

Mailing Address 34145 Pacific Coast Highway
 #244

City State Zip Code
 Dana Point CA 92629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cadwell Banker

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.177897

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial) Michael C Colley Mailing Address 444 Magnolia Dr City State Zip Code Gulf Shores AL 36542-4408 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Security and Policy Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 6 Transaction ID: SA11A1.179528 Amount of Each Receipt this Period 100.00 Contribution
B. Full Name (Last, First, Middle Initial) Michael C Colley Mailing Address 444 Magnolia Dr City State Zip Code Gulf Shores AL 36542-4408 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Security and Policy Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 0 / 2 0 0 6 Transaction ID: SA11A1.179794 Amount of Each Receipt this Period 100.00 Contribution
C. Full Name (Last, First, Middle Initial) Michael C Colley Mailing Address 444 Magnolia Dr City State Zip Code Gulf Shores AL 36542-4408 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Security and Policy Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00			Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 1 / 2 0 0 6 Transaction ID: SA11A1.179866 Amount of Each Receipt this Period 500.00 Contribution

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)

Kelvin Contreary

Mailing Address 1 Wren St

City State Zip Code
 New Orleans LA 70124-4121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 1 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.180029

Amount of Each Receipt this Period

1000.00

Contribution

B. Full Name (Last, First, Middle Initial)

Ronald Corry

Mailing Address 1205 Plaza Del Toro

City State Zip Code
 Sierra Vista AZ 85635-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 1 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.179531

Amount of Each Receipt this Period

300.00

Contribution

C. Full Name (Last, First, Middle Initial)

David DePriest

Mailing Address 2632 Shadow Bluff Dr NE

City State Zip Code
 Marietta GA 30062-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer
DePriest Associates, Inc.

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 1 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.178049

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)

John Doty

Mailing Address 2238 E 21st St

City State Zip Code
 Signal Hill CA 90755-5925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Doty Bros.Equip.

Occupation
Estimator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.178070

Amount of Each Receipt this Period

250.00

Contribution

B. Full Name (Last, First, Middle Initial)

Joshua Dunn

Mailing Address 9529 Orion Ct

City State Zip Code
 Burke VA 22015-3242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cato Institute

Occupation
Intern

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.177913

Amount of Each Receipt this Period

450.00

Contribution

C. Full Name (Last, First, Middle Initial)

Andy Favor

Mailing Address 24121 Oleander Way

City State Zip Code
 Laguna Niguel CA 92677-7065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.180038

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)
Clyde N Garman
Mailing Address 1002 N Jerrie Ave Apt 7

City State Zip Code
Tucson AZ 85711-1163

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.179938

Amount of Each Receipt this Period

25.00

Contribution

B. Full Name (Last, First, Middle Initial)
William W Hall
Mailing Address 11002 Stegman Forest Ct NE

City State Zip Code
Rockford MI 49341-8742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Warner Norcross & Judd LLP

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.179078

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Vince Hanke
Mailing Address 6795 Sunbriar Dr

City State Zip Code
Cumming GA 30040-6589

FEC ID number of contributing
federal political committee.

C

Name of Employer
V & L Management Co

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.179038

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1025.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)

Gregory T Hertzsch

Mailing Address 120 Hills Dr

City State Zip Code
 Clarksville IN 47129-2539

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vivid Impact, Inc.

Occupation
Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.179066

Amount of Each Receipt this Period

300.00

Contribution

B. Full Name (Last, First, Middle Initial)

Brian Holtz

Mailing Address 23 Whitman Ct

City State Zip Code
 San Carlos CA 94070-4268

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sun Microsystems

Occupation
SW Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.178838

Amount of Each Receipt this Period

750.00

Contribution

C. Full Name (Last, First, Middle Initial)

Gerald Jacknow

Mailing Address 4001 Lakeplace Ln

City State Zip Code
 Austin TX 78746-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clinical Pathology Assoc.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.177969

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)
David D. Jameson

Mailing Address 8469 Fenton Rd

City State Zip Code
Grand Blanc MI 48439-8968

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.178752

Amount of Each Receipt this Period

1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Jonathan Kahn

Mailing Address 1108 Cheyenne Dr

City State Zip Code
Crown Point IN 46307

FEC ID number of contributing
federal political committee.

C

Name of Employer
Broadway Radiology

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.177881

Amount of Each Receipt this Period

225.00

Contribution

C. Full Name (Last, First, Middle Initial)
Jeremy Keil

Mailing Address 5620 S Denis Ct

City State Zip Code
Hales Corners WI 53130-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thrivent Financial

Occupation
Financial Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.178900

Amount of Each Receipt this Period

359.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1584.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A.

Full Name (Last, First, Middle Initial)

Erik C Kelley

Mailing Address 6617 S Palm Dr.

City

Tempe

State

AZ

Zip Code

85283-3705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Laboratory Corp. of Ameri-
ca

Occupation

Medical Lab Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.178360

Amount of Each Receipt this Period

150.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Larry Korn

Mailing Address Unknown

City

Unknown

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.180146

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Richard Mancini

Mailing Address 719 Talon Pl

City

Louisville

State

KY

Zip Code

40223-5578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Humana Inc.

Occupation

Excutive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.178264

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial) Chuck E Moulton		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 1036 Hemlock Dr		Transaction ID: SA11A1.179058
City State Zip Code Blue Bell PA 19422-1572	Amount of Each Receipt this Period 89.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Villanova Law School	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.00	

B. Full Name (Last, First, Middle Initial) George W Mowbray		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 3649 Burton Ln		Transaction ID: SA11A1.178363
City State Zip Code Lake Charles LA 70605-1025	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Lake Charles Pilots, Inc.	Occupation River Pilot	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Scott Olmsted		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 132 N. El Camino Real #336		Transaction ID: SA11A1.180420
City State Zip Code Encinitas CA 92024	Amount of Each Receipt this Period 225.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)

464.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Steve Rothacker

Mailing Address 689 Kentwood Dr

City

Rockwall

State

TX

Zip Code

75032-7505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.180265

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Michael J Runnebohm

Mailing Address 2587 S 250 E

City

Shelbyville

State

IN

Zip Code

46176-9310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Runnebohm Construction

Occupation

Business Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.178684

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mary Ruwart

Mailing Address 2455 Brathay Court

City

Charlotte

State

NC

Zip Code

28269

FEC ID number of contributing
federal political committee.

C

Name of Employer
Healing Our World Books

Occupation

Owner - Self

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.178236

Amount of Each Receipt this Period

270.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1020.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 17 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)
 BetteRose Ryan
 Mailing Address 4404 S Arden Ave

City State Zip Code
 Sioux Falls SD 57103-5219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 1 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.179870

Amount of Each Receipt this Period

500.00

Contribution

B. Full Name (Last, First, Middle Initial)
 R. Anthony Ryan
 Mailing Address 4404 S Arden Ave

City State Zip Code
 Sioux Falls SD 57103-5219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Denver Police Dept.

Occupation
Law Enforcement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 1 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.178044

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)
 Emily H. Salvette
 Mailing Address 2016 Devonshire Rd

City State Zip Code
 Ann Arbor MI 48104-4058

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 1 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.179597

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial) Emily H. Salvette		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address 2016 Devonshire Rd		
City	State	Zip Code
Ann Arbor	MI	48104-4058
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.180108
Name of Employer Information Requested		Amount of Each Receipt this Period 50.00
Occupation Information Requested		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 550.00		

B. Full Name (Last, First, Middle Initial) John R Seydel		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 3 / 2 0 0 6
Mailing Address 1027 Peachtree Battle Ave NW		
City	State	Zip Code
Atlanta	GA	30327-1317
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.179982
Name of Employer None		Amount of Each Receipt this Period 500.00
Occupation Retired		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Arin Sime		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 1875 Clay Drive		
City	State	Zip Code
Crozet	VA	22932
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.178069
Name of Employer Donor Town Square		Amount of Each Receipt this Period 900.00
Occupation Owner - Self		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 900.00		

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)

George Squyres

Mailing Address PO Box 30697

City State Zip Code
 Flagstaff AZ 86003-0697

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.180123

Amount of Each Receipt this Period

500.00

Contribution

B. Full Name (Last, First, Middle Initial)

Marta Tollerup

Mailing Address PO Box 2295

City State Zip Code
 Prescott AZ 86302-2295

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.180127

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)

Kevin Anthony Torres

Mailing Address 2020 Peach Orchard Dr Apt 14

City State Zip Code
 Falls Church VA 22043-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.178503

Amount of Each Receipt this Period

359.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1359.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)
Frank C Ullman
Mailing Address 1 Toms Point Ln Apt 02C

City State Zip Code
Port Washington NY 11050-2128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cedar shopping centers INC

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.177920

Amount of Each Receipt this Period

250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Cheslaw Wisniewski
Mailing Address 3940 Sinclair Shores Rd

City State Zip Code
Cumming GA 30041-5415

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.180286

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

17702.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 103

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)
LIBERTARIAN REFORM PAC

Mailing Address PO BOX 1798

City State Zip Code
WEAVERVILLE NC 28787

FEC ID number of contributing
federal political committee.

C C00419341

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 6

Transaction ID: SA11C.180639

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 103

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

A. Full Name (Last, First, Middle Initial)
LPWA - Libertarian Party of Washington

Mailing Address P.O. Box 7118

City State Zip Code
 Bellevue WA 98008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 3 1 / 2 0 0 6

Transaction ID: SA12.180636

Amount of Each Receipt this Period

1000.00

Transfer

B. Full Name (Last, First, Middle Initial)
LPWI - LIBERTARIAN PARTY OF WISCONSIN

Mailing Address PO BOX 20815

City State Zip Code
 GREENFIELD WI 53220

FEC ID number of contributing
federal political committee.

C

C00387035

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

48.75

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 7 / 2 0 0 6

Transaction ID: SA12.180634

Amount of Each Receipt this Period

48.75

Transfer

C. Full Name (Last, First, Middle Initial)
LPWI - LIBERTARIAN PARTY OF WISCONSIN

Mailing Address PO BOX 20815

City State Zip Code
 GREENFIELD WI 53220

FEC ID number of contributing
federal political committee.

C

C00387035

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

97.50

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 9 / 2 0 0 6

Transaction ID: SA12.180635

Amount of Each Receipt this Period

48.75

Transfer

SUBTOTAL of Receipts This Page (optional)

1097.50

TOTAL This Period (last page this line number only)

1097.50

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. American Express Card -42007

Mailing Address PO Box 1270

City
Newark

State
NJ

Zip Code
07101-1270

Purpose of Disbursement
Credit Card Payment-See Attached Memo

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180508

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2006

Amount of Each Disbursement this Period

2387.71

Full Name (Last, First, Middle Initial)

B. Xpedite - Premier Global

Mailing Address 1268 Paysphere Cir.

City
Chicago

State
IL

Zip Code
60674-1268

Purpose of Disbursement
Faxing Seivces Non Candidate

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180508.0

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2006

Amount of Each Disbursement this Period

2387.71

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American National Insurance Co.

Mailing Address Attn: Lea Pollack
P. O. Box 1830 - Pension Dept.

City
Galveston

State
TX

Zip Code
77550-1830

Purpose of Disbursement
401k Plan Contributions

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180524

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2006

Amount of Each Disbursement this Period

478.86

SUBTOTAL of Disbursements This Page (optional)

2866.57

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Anthem Blue Cross Blue Shield

Mailing Address PO Box 85101

City
Richmond

State
VA

Zip Code
23285-5101

Purpose of Disbursement
Employee Medical

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180532

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

558.75

Full Name (Last, First, Middle Initial)

B. BentleyForbes Watergate LLC

Mailing Address 1578 Paysphere Circle

City
Chicago

State
IL

Zip Code
60674

Purpose of Disbursement
Office Rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180536

Date of Disbursement

01 / 01 / 2006

Amount of Each Disbursement this Period

8959.77

Full Name (Last, First, Middle Initial)

C. Blackbaud

Mailing Address P.O. Box 930256

City
Atlanta

State
GA

Zip Code
31193-0256

Purpose of Disbursement
Software Purchase

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180545

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

7915.65

SUBTOTAL of Disbursements This Page (optional)

17434.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. CANANWILL, INC

Mailing Address PO Box # 19639

City
Newark

State
NJ

Zip Code
07195-0639

Purpose of Disbursement
Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180511

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

758.36

Full Name (Last, First, Middle Initial)

B. J. Daniel Cloud

Mailing Address 1013 Price Ave

City
Columbia

State
SC

Zip Code
29201

Purpose of Disbursement
Party Newspaper Writing - Editing Service

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180468

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

C. CNA1 - CNA Insurance

Mailing Address PO Box 382033

City
Pittsburgh

State
PA

Zip Code
15250-8033

Purpose of Disbursement
Gen Liability Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180507

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

238.20

SUBTOTAL of Disbursements This Page (optional)

2746.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. CNA Insurance

Mailing Address PO Box 382033

City
Pittsburgh

State
PA

Zip Code
15250

Purpose of Disbursement
General Liability Insurance

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180547

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

953.80

Full Name (Last, First, Middle Initial)

B. Shane Cory

Mailing Address 5 Burwell Place

City
Stafford

State
VA

Zip Code
22554

Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180466

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

2091.81

Full Name (Last, First, Middle Initial)

C. Shane Cory

Mailing Address 5 Burwell Place

City
Stafford

State
VA

Zip Code
22554

Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180467

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

2091.80

SUBTOTAL of Disbursements This Page (optional)

5137.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Matthew T Dailey

Mailing Address 3515 Washington Blvd #511

City
Arlington

State
VA

Zip Code
22201

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180456

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

897.61

Full Name (Last, First, Middle Initial)

B. Matthew T Dailey

Mailing Address 3515 Washington Blvd #511

City
Arlington

State
VA

Zip Code
22201

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180461

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

928.82

Full Name (Last, First, Middle Initial)

C. DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
DC - Withholding

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180499

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

233.00

SUBTOTAL of Disbursements This Page (optional)

2059.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
DC - Unemployment Company

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180483

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

124.98

Full Name (Last, First, Middle Initial)

B. DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
DC - Withholding

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180484

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

264.00

Full Name (Last, First, Middle Initial)

C. De Lage Landen Financial

Mailing Address PO Box 41601

City
Philadelphia

State
PA

Zip Code
19101-1601

Purpose of Disbursement
Equipment Lease

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180550

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

541.55

SUBTOTAL of Disbursements This Page (optional)

930.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Susan M Dickson

Mailing Address 2206 N. Pickett St

City
Alexandria

State
VA

Zip Code
22304

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180459

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

876.49

Full Name (Last, First, Middle Initial)

B. Susan M Dickson

Mailing Address 2206 N. Pickett St

City
Alexandria

State
VA

Zip Code
22304

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180458

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

828.88

Full Name (Last, First, Middle Initial)

C. Gladis A Douwopka

Mailing Address 311 Dawsons Ave, Apt #6

City
Rockville

State
MD

Zip Code
20850

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180452

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

529.12

SUBTOTAL of Disbursements This Page (optional)

2234.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Gladis A Douwopka

Mailing Address 311 Dawsons Ave, Apt #6

City State Zip Code
Rockville MD 20850

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180453

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

678.61

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Federal Withholding

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180491

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

873.00

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Social Security Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180492

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

668.72

SUBTOTAL of Disbursements This Page (optional)

2220.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Social Security Employee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180493

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

668.72

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Medicare Company

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180494

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

156.40

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Medicare Employee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180495

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

156.40

SUBTOTAL of Disbursements This Page (optional)

981.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Federal Unemployment

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180496

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

86.29

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Federal Withholding

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180476

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

948.00

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Social Security Company

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180477

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

713.64

SUBTOTAL of Disbursements This Page (optional)

1747.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Social Security Employee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180478

Date of Disbursement

/ /

Amount of Each Disbursement this Period

713.64

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Medicare Company

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180479

Date of Disbursement

/ /

Amount of Each Disbursement this Period

166.89

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Medicare Employee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180480

Date of Disbursement

/ /

Amount of Each Disbursement this Period

166.89

SUBTOTAL of Disbursements This Page (optional)

1047.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Federal Unemployment

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180481

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

92.08

Full Name (Last, First, Middle Initial)

B. Joe Ragan's

Mailing Address PO Box 125

City
Springfield

State
VA

Zip Code
22150-0125

Purpose of Disbursement
Office Supplies

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180553

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

327.19

Full Name (Last, First, Middle Initial)

C. Robert S Kraus

Mailing Address 106 Roberts Ln #100

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180464

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

1015.51

SUBTOTAL of Disbursements This Page (optional)

1434.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Robert S Kraus

Mailing Address 106 Roberts Ln #100

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180465

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

999.52

Full Name (Last, First, Middle Initial)

B. John V LaBeaume

Mailing Address 1906 R St NW #12

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180454

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

728.62

Full Name (Last, First, Middle Initial)

C. John V LaBeaume

Mailing Address 1906 R St NW #12

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180460

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

908.87

SUBTOTAL of Disbursements This Page (optional)

2637.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. MAMSI - UnitedHealth (WFG)

Mailing Address PO Box 42924

City
Philadelphia

State
PA

Zip Code
19101-2924

Purpose of Disbursement
Employee Health & Dental

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180522

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

241.76

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 890 Mountain Ave

City
New Providence

State
NJ

Zip Code
07974

Purpose of Disbursement
Merch Svcs Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180526

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

1169.04

Full Name (Last, First, Middle Initial)

C. Samuel P New

Mailing Address 1500 Massachusetts Ave, NW
Apt 842

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180457

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

940.32

SUBTOTAL of Disbursements This Page (optional)

2351.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Samuel P New

Mailing Address 1500 Massachusetts Ave, NW
Apt 842

City Washington State DC Zip Code 20005

Purpose of Disbursement

Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180463

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

935.40

Full Name (Last, First, Middle Initial)

B. Samuel P New

Mailing Address 1500 Massachusetts Ave, NW
Apt 842

City Washington State DC Zip Code 20005

Purpose of Disbursement

Travel Reimbursement See Attached Memo

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180471

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

635.15

Full Name (Last, First, Middle Initial)

C. Hilton Pheonix Airport

Mailing Address 2435 S 47th St

City Pheonix State AZ Zip Code 85034

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180471.0

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

635.15

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1570.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. David W. Owens

Mailing Address 250 Mercer Mill Rd.

City
Landenberg

State
PA

Zip Code
19350

Purpose of Disbursement
Non Candidate Party Related Promo Video

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180470

Date of Disbursement

01 / 18 / 2006

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

B. Postmaster

Mailing Address US Post Office Watergate
2500 virginia Ave NW

City
Washington

State
DC

Zip Code
20037

Purpose of Disbursement
Non Candidate Postage Mailing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180516

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Postmaster - Walton Press

Mailing Address Walton Press
402 Mavfield Dr

City
Monroe

State
GA

Zip Code
30655

Purpose of Disbursement
Non Candidate Postage Mailing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.180525

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

2566.88

SUBTOTAL of Disbursements This Page (optional)

10566.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Prospect Tech

Mailing Address 3246 Prospect St NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Network and Telephone Systems Maintenanc

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180555

Date of Disbursement

01 / 06 / 2006

Amount of Each Disbursement this Period

749.00

Full Name (Last, First, Middle Initial)

B. Prospect Tech

Mailing Address 3246 Prospect St NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Network and Phone Systems Maint.

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180530

Date of Disbursement

01 / 20 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. QuickBooks Payroll Service

Mailing Address PO Box 30015

City Reno State NV Zip Code 89520-3015

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180490

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

4.66

SUBTOTAL of Disbursements This Page (optional)

3253.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
Reno

State
NV

Zip Code
89520-3015

Purpose of Disbursement
VA - Withholding

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180497

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

260.00

Full Name (Last, First, Middle Initial)

B. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
Reno

State
NV

Zip Code
89520-3015

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180473

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

13.75

Full Name (Last, First, Middle Initial)

C. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
Reno

State
NV

Zip Code
89520-3015

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180474

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

7.25

SUBTOTAL of Disbursements This Page (optional)

281.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
Reno

State
NV

Zip Code
89520-3015

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180475

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

1.21

B. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
Reno

State
NV

Zip Code
89520-3015

Purpose of Disbursement
VA - Withholding

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180482

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

266.00

C. Steve Rosa

Mailing Address 4829 West Braddock Road, Apt 3

City
Alexandria

State
VA

Zip Code
22311

Purpose of Disbursement
Non Candidate Desktop Publishing Service

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180557

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

457.50

SUBTOTAL of Disbursements This Page (optional)

724.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. Chris D Thorman

Mailing Address 4527 Wilson Blvd #101

City
Arlington

State
VA

Zip Code
22203

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180455

Date of Disbursement

01 / 11 / 2006

Amount of Each Disbursement this Period

766.02

Full Name (Last, First, Middle Initial)

B. Chris D Thorman

Mailing Address 4527 Wilson Blvd #101

City
Arlington

State
VA

Zip Code
22203

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180462

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

867.98

Full Name (Last, First, Middle Initial)

C. Ticketmaster

Mailing Address 1304 Hornby Street

City
Vancouver BC V6Z 1

State
ZZ

Zip Code

Purpose of Disbursement
EOM Credit Card Processing Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180539

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

250.66

SUBTOTAL of Disbursements This Page (optional)

1884.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 / 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. US LEC

Mailing Address PO Box 60130

City
Charlotte

State
NC

Zip Code
28260-1310

Purpose of Disbursement
Telephone and Data Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180564

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

475.51

Full Name (Last, First, Middle Initial)

B. US LEC

Mailing Address PO Box 60130

City
Charlotte

State
NC

Zip Code
28260-1310

Purpose of Disbursement
Telephone and Data Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180566

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

C. VA Dept. of Taxation

Mailing Address PO Box 1278

City
Richmond

State
VA

Zip Code
23218-1278

Purpose of Disbursement
VA - Unemployment Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180485

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

105.05

SUBTOTAL of Disbursements This Page (optional)

1130.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Libertarian National Committee

Full Name (Last, First, Middle Initial)

A. WMATA - Metrochek

Mailing Address 600 Fifth St NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Metrochecks

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.180528

Date of Disbursement

01 / 05 / 2006

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

400.00

TOTAL This Period (last page this line number only)

65641.29

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 45 / 103

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Christopher DarzinskiNature of Debt (Purpose):
Advertising

Mailing Address 1359 Chandler Ave

City State ZIP Code
Lincoln Park MI 48146-2009

Outstanding Balance Beginning This Period

20.00

Transaction ID: SD9.15703

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Allen HendrixNature of Debt (Purpose):
Advertising

Mailing Address 546 Bear Creek Rd

City State ZIP Code
Carrollton GA 30117-7669

Outstanding Balance Beginning This Period

25.00

Transaction ID: SD9.19679

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.00

1) **SUBTOTALS** This Period This Page (optional).....

45.00

2) **TOTALS** This Period (last page this line number only).....

45.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 46 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
AccurintNature of Debt (Purpose):
Address and Phone Verifica-
tion

Mailing Address P.O. Box 538358

City State ZIP Code
Atlanta GA 30353-8358

Outstanding Balance Beginning This Period

127.50

Transaction ID: SD10.175168

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

127.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Advanced Mailing Services, LLCNature of Debt (Purpose):
Non Candidate Printing/Ma-
iling

Mailing Address 14970 Farm Creek Drive

City State ZIP Code
Woodbridge VA 22191-3550

Outstanding Balance Beginning This Period

1167.35

Transaction ID: SD10.177674

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1167.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Advanced Mailing Services, LLCNature of Debt (Purpose):
Non Candidate Printing/Ma-
iling

Mailing Address 14970 Farm Creek Drive

City State ZIP Code
Woodbridge VA 22191-3550

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180568

Amount Incurred This Period

1233.27

Payment This Period

0.00

Outstanding Balance at Close of This Period

1233.27

1) SUBTOTALS This Period This Page (optional).....

2528.12

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Advocates for Self GovernmentNature of Debt (Purpose):
Quiz Cards

Mailing Address 5 South Public Square #304

City State ZIP Code
Cartersville GA 30120

Outstanding Balance Beginning This Period

830.00

Transaction ID: SD10.80520

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

830.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
American National Insurance Co.Nature of Debt (Purpose):
401K Plan RemittanceMailing Address Attn: Lea Pollack
P. O. Box 1830 - Pension Dept.City State ZIP Code
Galveston TX 77550-1830

Outstanding Balance Beginning This Period

478.86

Transaction ID: SD10.177691

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

478.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
American National Insurance Co.Nature of Debt (Purpose):
401K Plan RemittanceMailing Address Attn: Lea Pollack
P. O. Box 1830 - Pension Dept.City State ZIP Code
Galveston TX 77550-1830

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180569

Amount Incurred This Period

492.31

Payment This Period

0.00

Outstanding Balance at Close of This Period

492.31

1) SUBTOTALS This Period This Page (optional).....

1801.17

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 48 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
B & B DuplicatorsNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 818 18th Street NW LL15

City State ZIP Code
Washington DC 20006

Outstanding Balance Beginning This Period

2226.05

Transaction ID: SD10.171284

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2226.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
B & B DuplicatorsNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 818 18th Street NW LL15

City State ZIP Code
Washington DC 20006

Outstanding Balance Beginning This Period

666.23

Transaction ID: SD10.175104

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

666.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
B & B DuplicatorsNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 818 18th Street NW LL15

City State ZIP Code
Washington DC 20006

Outstanding Balance Beginning This Period

338.40

Transaction ID: SD10.177675

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

338.40

1) SUBTOTALS This Period This Page (optional).....

3230.68

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 49 / 103

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Libertarian National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dean Bankert

Nature of Debt (Purpose):
Advertising

Mailing Address 1080 Fairfield Road

City State ZIP Code
Gettysburg PA 17325

Outstanding Balance Beginning This Period

22.50

Transaction ID: SD10.34463

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Blackbaud

Nature of Debt (Purpose):
Database Services

Mailing Address P.O. Box 930256

City State ZIP Code
Atlanta GA 31193-0256

Outstanding Balance Beginning This Period

1869.61

Transaction ID: SD10.130069

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1869.61

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Blackbaud

Nature of Debt (Purpose):
Disputed-Annual Licensing
Fee

Mailing Address P.O. Box 930256

City State ZIP Code
Atlanta GA 31193-0256

Outstanding Balance Beginning This Period

7915.65

Transaction ID: SD10.175106

Amount Incurred This Period

0.00

Payment This Period

7915.65

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

1892.11

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
BlackbaudNature of Debt (Purpose):
Que Software Licensing Fee
1/06-12/06

Mailing Address P.O. Box 930256

City State ZIP Code
Atlanta GA 31193-0256

Outstanding Balance Beginning This Period

3347.06

Transaction ID: SD10.177692

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3347.06

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Edward BowersNature of Debt (Purpose):
Advertising

Mailing Address 291 S La Cienega Blvd # 638

City State ZIP Code
Beverly Hills CA 90211-3325

Outstanding Balance Beginning This Period

63.75

Transaction ID: SD10.32948

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

63.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Virginia BrewerNature of Debt (Purpose):
Advertising

Mailing Address P.O. Box 237

City State ZIP Code
Saunderstown RI 02874

Outstanding Balance Beginning This Period

56.25

Transaction ID: SD10.32954

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

56.25

1) SUBTOTALS This Period This Page (optional).....

3467.06

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Libertarian National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Virginia Brewer

Nature of Debt (Purpose):
Advertising

Mailing Address P.O. Box 237

City State ZIP Code
Saunderstown RI 02874

Outstanding Balance Beginning This Period

56.25

Transaction ID: SD10.33003

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

56.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Brown, Wanda O

Nature of Debt (Purpose):
Non Candidate Direct Mail
Consulting

Mailing Address 21306 Blackjack Road

City State ZIP Code
Shelbyville IN 46176-9310

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180570

Amount Incurred This Period

100.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central Parking System

Nature of Debt (Purpose):
Parking

Mailing Address PO Box 17505

City State ZIP Code
Baltimore MD 21297-1505

Outstanding Balance Beginning This Period

25.00

Transaction ID: SD10.106351

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.00

1) **SUBTOTALS** This Period This Page (optional).....

181.25

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Central Parking SystemNature of Debt (Purpose):
Parking

Mailing Address PO Box 17505

City State ZIP Code
Baltimore MD 21297-1505

Outstanding Balance Beginning This Period

125.00

Transaction ID: SD10.171248

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

125.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Daniel CloudNature of Debt (Purpose):
LP News Writing Non Candi-
date

Mailing Address 1013 Price Ave

City State ZIP Code
Columbia SC 29201-1857

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180571

Amount Incurred This Period

1750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CNA InsuranceNature of Debt (Purpose):
Insurance

Mailing Address PO Box 382033

City State ZIP Code
Pittsburgh PA 15250

Outstanding Balance Beginning This Period

953.80

Transaction ID: SD10.69872

Amount Incurred This Period

0.00

Payment This Period

953.80

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

1875.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Commonwealth Digital Office SolutionsNature of Debt (Purpose):
Office Copier Maintenance

Mailing Address 21205 Ridgetop Circle

City State ZIP Code
Sterling VA 20166-6501

Outstanding Balance Beginning This Period

249.32

Transaction ID: SD10.171287

Amount Incurred This Period

0.00

Payment This Period

123.69

Outstanding Balance at Close of This Period

125.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Commonwealth Digital Office SolutionsNature of Debt (Purpose):
Office Copier Maintenance

Mailing Address 21205 Ridgetop Circle

City State ZIP Code
Sterling VA 20166-6501

Outstanding Balance Beginning This Period

135.08

Transaction ID: SD10.175108

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Commonwealth Digital Office SolutionsNature of Debt (Purpose):
Office Copier Maintenance

Mailing Address 21205 Ridgetop Circle

City State ZIP Code
Sterling VA 20166-6501

Outstanding Balance Beginning This Period

155.02

Transaction ID: SD10.177676

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

155.02

1) SUBTOTALS This Period This Page (optional).....

415.73

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Commonwealth Digital Office SolutionsNature of Debt (Purpose):
Office Copier Maintenance

Mailing Address 21205 Ridgetop Circle

City State ZIP Code
Sterling VA 20166-6501

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180572

Amount Incurred This Period

125.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

125.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Corporate & LeisureNature of Debt (Purpose):
Staff Travel

Mailing Address 2700 West Cyprus Creek Rd Ste D-10

City State ZIP Code
Fort Lauderdale FL 33309

Outstanding Balance Beginning This Period

822.18

Transaction ID: SD10.171288

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

822.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cory ConsultingNature of Debt (Purpose):
Internet List Services

Mailing Address 325 Garrisonville Road Suite 106

City State ZIP Code
Stafford VA 22554

Outstanding Balance Beginning This Period

1905.00

Transaction ID: SD10.106352

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1905.00

1) SUBTOTALS This Period This Page (optional).....

2852.19

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cory ConsultingNature of Debt (Purpose):
Internet List Services

Mailing Address 325 Garrisonville Road Suite 106

City State ZIP Code
Stafford VA 22554

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180573

Amount Incurred This Period

930.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

930.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Thomas CoxNature of Debt (Purpose):
Advertising

Mailing Address 12602 SW Farmington Road

City State ZIP Code
Beaverton OR 97005

Outstanding Balance Beginning This Period

487.50

Transaction ID: SD10.32960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

487.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Thomas CoxNature of Debt (Purpose):
Advertising

Mailing Address 12602 SW Farmington Road

City State ZIP Code
Beaverton OR 97005

Outstanding Balance Beginning This Period

487.50

Transaction ID: SD10.32961

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

487.50

1) SUBTOTALS This Period This Page (optional).....

1905.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
DatapriseNature of Debt (Purpose):
Internet Services

Mailing Address PO Box 17672

City State ZIP Code
Baltimore MD 21297

Outstanding Balance Beginning This Period

1901.25

Transaction ID: SD10.171289

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1901.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DatapriseNature of Debt (Purpose):
Internet Services

Mailing Address PO Box 17672

City State ZIP Code
Baltimore MD 21297

Outstanding Balance Beginning This Period

990.00

Transaction ID: SD10.177677

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

990.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
De Lage Landen FinancialNature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 41601

City State ZIP Code
Philadelphia PA 19101-1601

Outstanding Balance Beginning This Period

542.98

Transaction ID: SD10.110792

Amount Incurred This Period

0.00

Payment This Period

541.55

Outstanding Balance at Close of This Period

1.43

1) SUBTOTALS This Period This Page (optional).....

2892.68

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
De Lage Landen FinancialNature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 41601

City State ZIP Code
Philadelphia PA 19101-1601

Outstanding Balance Beginning This Period

517.12

Transaction ID: SD10.171253

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

517.12

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
De Lage Landen FinancialNature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 41601

City State ZIP Code
Philadelphia PA 19101-1601

Outstanding Balance Beginning This Period

517.12

Transaction ID: SD10.171290

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

517.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
De Lage Landen FinancialNature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 41601

City State ZIP Code
Philadelphia PA 19101-1601

Outstanding Balance Beginning This Period

593.27

Transaction ID: SD10.177678

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

593.27

1) SUBTOTALS This Period This Page (optional).....

1627.51

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
De Lage Landen FinancialNature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 41601

City State ZIP Code
Philadelphia PA 19101-1601

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180574

Amount Incurred This Period

526.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

526.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
District of Columbia Libertarian PartyNature of Debt (Purpose):
UMP payment

Mailing Address 4733 First Street SW #303

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

87.00

Transaction ID: SD10.34610

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

87.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Michael DixonNature of Debt (Purpose):
Travel Reimbursement-Airfare

Mailing Address 116 N Brackenbury Ln

City State ZIP Code
Charlotte NC 28270-1901

Outstanding Balance Beginning This Period

439.32

Transaction ID: SD10.110793

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

439.32

1) SUBTOTALS This Period This Page (optional).....

1052.62

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paula Edwards, CPANature of Debt (Purpose):
FEC Compliance/File Retrieval and Repair

Mailing Address 1318 Roxanna Road NW

City State ZIP Code
Washington DC 20012

Outstanding Balance Beginning This Period

31175.00

Transaction ID: SD10.177679

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31175.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ENTCO Int. IncNature of Debt (Purpose):
Disputed-Convention Services Consulting

Mailing Address 20016 Cedar Valley Road

City State ZIP Code
Lynnwood WA 98036

Outstanding Balance Beginning This Period

4000.00

Transaction ID: SD10.175109

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ENTCO Int. IncNature of Debt (Purpose):
Disputed-Convention Services Consulting

Mailing Address 20016 Cedar Valley Road

City State ZIP Code
Lynnwood WA 98036

Outstanding Balance Beginning This Period

3150.00

Transaction ID: SD10.177681

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3150.00

1) SUBTOTALS This Period This Page (optional).....

38325.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 60 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
ENTCO Int. IncNature of Debt (Purpose):
Party Convention Services
Consulting

Mailing Address 20016 Cedar Valley Road

City State ZIP Code
Lynnwood WA 98036

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180575

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Gillis Data & Information Services, LLCNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 8990 Westchester Dr

City State ZIP Code
Manassas VA 20112-4504

Outstanding Balance Beginning This Period

1277.39

Transaction ID: SD10.110797

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1277.39

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patrick HellerNature of Debt (Purpose):
Advertising

Mailing Address 300 Frandor Ave

City State ZIP Code
Lansing MI 48909

Outstanding Balance Beginning This Period

850.00

Transaction ID: SD10.34464

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

1) SUBTOTALS This Period This Page (optional).....

5127.39

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
David HollistNature of Debt (Purpose):
Advertising

Mailing Address PO Box 1414

City State ZIP Code
Alta Loma CA 91701-8414

Outstanding Balance Beginning This Period

45.00

Transaction ID: SD10.18263

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

45.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
David HollistNature of Debt (Purpose):
Advertising

Mailing Address PO Box 1414

City State ZIP Code
Alta Loma CA 91701-8414

Outstanding Balance Beginning This Period

45.00

Transaction ID: SD10.18264

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

45.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
David HollistNature of Debt (Purpose):
Advertising

Mailing Address PO Box 1414

City State ZIP Code
Alta Loma CA 91701-8414

Outstanding Balance Beginning This Period

45.00

Transaction ID: SD10.18265

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

45.00

1) SUBTOTALS This Period This Page (optional).....

135.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
IntegramNature of Debt (Purpose):
Non Candidate Printing Se-
rvice

Mailing Address 8421 Hilltop Rd.

City State ZIP Code
Fairfax VA 22031-4316

Outstanding Balance Beginning This Period

9903.93

Transaction ID: SD10.80541

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9903.93

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
J&N PrintingNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 5495 Glenthorne Court

City State ZIP Code
Baltimore MD 21237

Outstanding Balance Beginning This Period

0.20

Transaction ID: SD10.171291

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
J&N PrintingNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 5495 Glenthorne Court

City State ZIP Code
Baltimore MD 21237

Outstanding Balance Beginning This Period

2333.46

Transaction ID: SD10.175112

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2333.46

1) SUBTOTALS This Period This Page (optional).....

12237.59

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 63 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
J&N PrintingNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 5495 Glenthorne Court

City State ZIP Code
Baltimore MD 21237

Outstanding Balance Beginning This Period

2289.75

Transaction ID: SD10.175172

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2289.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
J&N PrintingNature of Debt (Purpose):
Printing/Mailing Non Cand-
idate

Mailing Address 5495 Glenthorne Court

City State ZIP Code
Baltimore MD 21237

Outstanding Balance Beginning This Period

1837.00

Transaction ID: SD10.177683

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1837.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
J&N PrintingNature of Debt (Purpose):
Non Candidate Party Letter
Mailing

Mailing Address 5495 Glenthorne Court

City State ZIP Code
Baltimore MD 21237

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180576

Amount Incurred This Period

2520.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2520.00

1) SUBTOTALS This Period This Page (optional).....

6646.75

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Joe Ragan'sNature of Debt (Purpose):
Office Supplies

Mailing Address PO Box 125

City State ZIP Code
Springfield VA 22150-0125

Outstanding Balance Beginning This Period

118.10

Transaction ID: SD10.175113

Amount Incurred This Period

0.00

Payment This Period

118.10

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Joe Ragan'sNature of Debt (Purpose):
Office Supplies

Mailing Address PO Box 125

City State ZIP Code
Springfield VA 22150-0125

Outstanding Balance Beginning This Period

327.19

Transaction ID: SD10.177685

Amount Incurred This Period

0.00

Payment This Period

327.19

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Joe Ragan'sNature of Debt (Purpose):
Office Supplies

Mailing Address PO Box 125

City State ZIP Code
Springfield VA 22150-0125

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180578

Amount Incurred This Period

155.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

155.75

1) SUBTOTALS This Period This Page (optional).....

155.75

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Krieg Family TrustNature of Debt (Purpose):
Advertising

Mailing Address 23207 Night Heron Way

City State ZIP Code
Bradenton FL 34202

Outstanding Balance Beginning This Period

200.00

Transaction ID: SD10.34417

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lewis, DanNature of Debt (Purpose):
Editing Services Non Cand-
idate

Mailing Address 8755 Grantham Court

City State ZIP Code
Bristow VA 20136

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD10.175114

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jack LewisNature of Debt (Purpose):
Advertising

Mailing Address 5206 Chinook Ave

City State ZIP Code
Boise ID 83669-5606

Outstanding Balance Beginning This Period

165.00

Transaction ID: SD10.32977

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

165.00

1) SUBTOTALS This Period This Page (optional).....

615.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34419

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34420

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34421

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

1) SUBTOTALS This Period This Page (optional).....

54.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 67 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34422

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34423

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

1) SUBTOTALS This Period This Page (optional).....

54.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34425

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34426

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34427

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

1) SUBTOTALS This Period This Page (optional).....

54.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 69 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Libertarians for LifeNature of Debt (Purpose):
Advertising

Mailing Address 13424 Hathaway Drive

City State ZIP Code
Wheaton MD 20906

Outstanding Balance Beginning This Period

18.00

Transaction ID: SD10.34428

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34434

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34436

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

1) SUBTOTALS This Period This Page (optional).....

186.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Libertarian National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda Logan

Nature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34437

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda Logan

Nature of Debt (Purpose):
Advertsiiing

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34438

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda Logan

Nature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34439

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

1) **SUBTOTALS** This Period This Page (optional).....

252.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34440

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34441

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34442

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

1) SUBTOTALS This Period This Page (optional).....

252.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 72 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34444

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34445

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34447

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

1) SUBTOTALS This Period This Page (optional).....

252.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 73 / 103

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wanda LoganNature of Debt (Purpose):
Advertising

Mailing Address 3718 Hoadly Loop

City State ZIP Code
Tumwater WA 98501

Outstanding Balance Beginning This Period

84.00

Transaction ID: SD10.34448

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

84.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPAK - Libertarian Party of AlaskaNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address PMB 373
205 E Dimond BlvdCity State ZIP Code
Anchorage AK 99515

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180581

Amount Incurred This Period

102.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

102.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPAL - Libertarian Party of AlabamaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 2330 Highland Ave

City State ZIP Code
Birmingham AL 35205

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180580

Amount Incurred This Period

275.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

275.00

1) SUBTOTALS This Period This Page (optional).....

461.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPA - Libertarian Party of ArkansasNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address PO Box 15214

City State ZIP Code
Little Rock AR 72231

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180584

Amount Incurred This Period

82.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

82.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPAZ - Libertarian Party of ArizonaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 4802 E. Ray Road #23-255

City State ZIP Code
Phoenix AZ 85044

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180582

Amount Incurred This Period

396.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

396.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPCA - Libertarian Party of CaliforniaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 14547 Titus St, Suite 214

City State ZIP Code
Panorama City CA 91402

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180585

Amount Incurred This Period

3286.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

3286.50

1) SUBTOTALS This Period This Page (optional).....

3765.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPCO - Libertarian Party of ColoradoNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 1425 Brentwood St

City State ZIP Code
Lakewood CO 80214

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180586

Amount Incurred This Period

721.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

721.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPCT - Libertarian Party of ConnecticutNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address Attn: Andy Rule
PO Box 2501City State ZIP Code
Middletown CT 06457-2501

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180587

Amount Incurred This Period

249.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

249.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPDE - Libertarian Party of DelawareNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 1472

City State ZIP Code
Dover DE 19903-1472

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180588

Amount Incurred This Period

58.88

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.88

1) SUBTOTALS This Period This Page (optional).....

1028.88

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPFL - Libertarian Party of FloridaNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address Libertarian Party of Florida
5901 Pendragon LaneCity State ZIP Code
Fort Myers FL 33912

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180589

Amount Incurred This Period

1089.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

1089.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPGA-LIBERTARIAN PARTY OF GEORGIANature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 1874 PIEDMONT RD SUITE 590-E

City State ZIP Code
ATLANTA GA 30324

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180590

Amount Incurred This Period

1054.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1054.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPHI - Libertarian Party of HawaiiNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 625 Keawe Street

City State ZIP Code
Honolulu HI 96813

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180591

Amount Incurred This Period

69.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

69.75

1) SUBTOTALS This Period This Page (optional).....

2213.50

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPIA - Libertarian Party of IowaNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address C/O Tim Hird
3119 E Diehl Ave.City State ZIP Code
Des Moines IA 50320

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180595

Amount Incurred This Period

178.88

Payment This Period

0.00

Outstanding Balance at Close of This Period

178.88

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPID - Libertarian Party of IdahoNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address c/of Gordon Wilmoth
517 CostonCity State ZIP Code
Boise ID 83712

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180592

Amount Incurred This Period

81.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

81.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPIL - Libertarian Party of IllinoisNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address c/of Jan Stover
515 W. Main StreetCity State ZIP Code
Greenville IL 62246

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180593

Amount Incurred This Period

687.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

687.75

1) SUBTOTALS This Period This Page (optional).....

948.38

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPIN - Libertarian Party of IndianaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 2587 S 250 E

City State ZIP Code
Shelbyville IN 46176-9310

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180594

Amount Incurred This Period

657.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

657.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPKS - Libertarian Party of KansasNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 2456

City State ZIP Code
Wichita KS 67201-2456

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180596

Amount Incurred This Period

242.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

242.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPKY - Libertarian Party of KentuckyNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 719 Talon Place

City State ZIP Code
Louisville KY 40223

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180597

Amount Incurred This Period

128.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

128.25

1) SUBTOTALS This Period This Page (optional).....

1027.75

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPLA - Libertarian Party of LouisianaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 66301

City State ZIP Code
Baton Rouge LA 70896-6301

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180598

Amount Incurred This Period

143.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

143.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPMA - Libertarian Party of MassachusettsNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address PMB #276, 203 Washington Street

City State ZIP Code
Salem MA 01970

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180600

Amount Incurred This Period

436.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPME - Libertarian Party of MaineNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 2020

City State ZIP Code
Biddeford ME 04005-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180599

Amount Incurred This Period

107.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.25

1) SUBTOTALS This Period This Page (optional).....

687.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPME - Libertarian Party of MaineNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 2020

City State ZIP Code
Biddeford ME 04005-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180607

Amount Incurred This Period

706.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

706.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPMI - Libertarian Party of MichiganNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address POB 27065

City State ZIP Code
Lansing MI 48924-7065

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180601

Amount Incurred This Period

736.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

736.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPMN - LIBERTARIAN PARTY OF MINNESOTANature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address PO BOX 580774

City State ZIP Code
Minneapolis MN 55458-0774

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180602

Amount Incurred This Period

295.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

295.50

1) SUBTOTALS This Period This Page (optional).....

1738.50

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPMO - Libertarian Party of MissouriNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 78623

City State ZIP Code
St Louis MO 63178-8623

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180604

Amount Incurred This Period

299.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

299.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPMS - Libertarian Party of MississippiNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address PMB 145, Suite 200
1625 E. County Line RoadCity State ZIP Code
Jackson MS 39211-1832

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180603

Amount Incurred This Period

66.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

66.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPNC - Libertarian Party of North CarolinaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 1821 Hillandale Rd #1b-253

City State ZIP Code
Durham NC 27705

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180608

Amount Incurred This Period

584.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

584.50

1) SUBTOTALS This Period This Page (optional).....

950.50

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPNE - Libertarian Party of NebraskaNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address Chris Costello
2301 S 32nd AveCity State ZIP Code
Omaha NE 68105

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180579

Amount Incurred This Period

76.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

76.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPNM - Libertarian Party of New MexicoNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address Ron Bjornstad
918 Ivory Rd SECity State ZIP Code
Rio Rancho NM 87124-3003

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180606

Amount Incurred This Period

182.63

Payment This Period

0.00

Outstanding Balance at Close of This Period

182.63

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPNV - Libertarian Party of NevadaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 94554

City State ZIP Code
Las Vegas NV 89193-4554

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180605

Amount Incurred This Period

243.38

Payment This Period

0.00

Outstanding Balance at Close of This Period

243.38

1) SUBTOTALS This Period This Page (optional).....

502.51

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPOH - Libertarian Party of OhioNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 700 Morse Rd Suite 208

City State ZIP Code
Columbus OH 43214

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180609

Amount Incurred This Period

693.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

693.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPOK - Libertarian Party of OklahomaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 3342

City State ZIP Code
Edmond OK 73083-3342

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180610

Amount Incurred This Period

126.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPOR - Libertarian Party of OregonNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address 12602 SW Farmington Road

City State ZIP Code
Beaverton OR 97005-2755

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180611

Amount Incurred This Period

459.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

459.00

1) SUBTOTALS This Period This Page (optional).....

1278.75

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPRI - Libertarian Party of Rhode IslandNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 603364

City State ZIP Code
Providence RI 02906

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180612

Amount Incurred This Period

33.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPSC - Libertarian Party of South CarolinaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 7767

City State ZIP Code
Myrtle Beach SC 29572-7767

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180613

Amount Incurred This Period

246.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

246.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPSC - Libertarian Party of South CarolinaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 9341

City State ZIP Code
Rapid City SD 57709-9341

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180614

Amount Incurred This Period

32.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.25

1) SUBTOTALS This Period This Page (optional).....

311.25

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPTN - Libertarian Party of TennesseeNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 2361

City State ZIP Code
Cookeville TN 38502

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180616

Amount Incurred This Period

309.38

Payment This Period

0.00

Outstanding Balance at Close of This Period

309.38

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPTX - Libertarian Party of TexasNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 56426

City State ZIP Code
Houston TX 77256

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180615

Amount Incurred This Period

1481.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1481.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPUT - Libertarian Party of UtahNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 526025

City State ZIP Code
Salt Lake City UT 84152-6052

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180617

Amount Incurred This Period

105.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

105.00

1) SUBTOTALS This Period This Page (optional).....

1895.88

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPVA - Libertarian Party of VirginiaNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address 4201 Wilson Blvd
Ste 100-164City State ZIP Code
Arlington VA 22203-1859

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180619

Amount Incurred This Period

953.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

953.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPVT - Libertarian Party of VermontNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address PO Box 5475

City State ZIP Code
Burlington VT 05402-5475

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180618

Amount Incurred This Period

68.63

Payment This Period

0.00

Outstanding Balance at Close of This Period

68.63

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPWA - Libertarian Party of WashingtonNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address P.O. Box 7118

City State ZIP Code
Bellevue WA 98008

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180620

Amount Incurred This Period

625.13

Payment This Period

0.00

Outstanding Balance at Close of This Period

625.13

1) SUBTOTALS This Period This Page (optional).....

1646.76

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPWV - Libertarian Party of West VirginiaNature of Debt (Purpose):
Unified Membership Payment
to Affiliate

Mailing Address PO Box 75423

City State ZIP Code
Charleston WV 25375-5423

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180621

Amount Incurred This Period

66.38

Payment This Period

0.00

Outstanding Balance at Close of This Period

66.38

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LPWY - Libertarian Party of WyomingNature of Debt (Purpose):
Unified Membership Payment
to AffiliateMailing Address C/O Carol Blomquist
840 Christie Dr.City State ZIP Code
Riverdon WY 82501

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180622

Amount Incurred This Period

38.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

38.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MSI-ACI Holding LLCNature of Debt (Purpose):
Market Research Non Candi-
date

Mailing Address 650 Park Avenue

City State ZIP Code
King of Prussia PA 19406

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180625

Amount Incurred This Period

4035.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4035.00

1) SUBTOTALS This Period This Page (optional).....

4139.63

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MV GlobalNature of Debt (Purpose):
Telephone Systems

Mailing Address 932 Sligo Ave

City State ZIP Code
Silver Spring MD 20910

Outstanding Balance Beginning This Period

630.00

Transaction ID: SD10.80546

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

630.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ed NagelNature of Debt (Purpose):
Advertising

Mailing Address PO Box 2823

City State ZIP Code
Santa Fe NM 87504-2823

Outstanding Balance Beginning This Period

105.00

Transaction ID: SD10.32982

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

105.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NetFire.com - SpeakeasyNature of Debt (Purpose):
Internet Hosting ServicesMailing Address c/o Speakeasy Accounts Receivable
1201 Western Ave.City State ZIP Code
Seattle WA 98101

Outstanding Balance Beginning This Period

280.37

Transaction ID: SD10.171294

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

280.37

1) SUBTOTALS This Period This Page (optional).....

1015.37

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
P Samuel NewNature of Debt (Purpose):
Petty Cash Reimbursement

Mailing Address 1308 T St NW

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

88.81

Transaction ID: SD10.69887

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

88.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
P Samuel NewNature of Debt (Purpose):
Petty Cash Reimbursement

Mailing Address 1308 T St NW

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

270.01

Transaction ID: SD10.80549

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

270.01

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tom PilitowskiNature of Debt (Purpose):
Advertising

Mailing Address 3280-55A Tamiami Trail #297

City State ZIP Code
Port Charlotte FL 33952

Outstanding Balance Beginning This Period

19.50

Transaction ID: SD10.19575

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.50

1) SUBTOTALS This Period This Page (optional).....

378.32

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tom PilitowskiNature of Debt (Purpose):
Advertising

Mailing Address 3280-55A Tamiami Trail #297

City State ZIP Code
Port Charlotte FL 33952

Outstanding Balance Beginning This Period

19.50

Transaction ID: SD10.19576

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tom PilitowskiNature of Debt (Purpose):
Advertising

Mailing Address 3280-55A Tamiami Trail #297

City State ZIP Code
Port Charlotte FL 33952

Outstanding Balance Beginning This Period

19.50

Transaction ID: SD10.19577

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tom PilitowskiNature of Debt (Purpose):
Advertising

Mailing Address 3280-55A Tamiami Trail #297

City State ZIP Code
Port Charlotte FL 33952

Outstanding Balance Beginning This Period

19.50

Transaction ID: SD10.19578

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.50

1) SUBTOTALS This Period This Page (optional).....

58.50

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tom PilitowskiNature of Debt (Purpose):
Advertising

Mailing Address 3280-55A Tamiami Trail #297

City State ZIP Code
Port Charlotte FL 33952

Outstanding Balance Beginning This Period

19.50

Transaction ID: SD10.19579

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tom PilitowskiNature of Debt (Purpose):
Advertising

Mailing Address 3280-55A Tamiami Trail #297

City State ZIP Code
Port Charlotte FL 33952

Outstanding Balance Beginning This Period

19.50

Transaction ID: SD10.19580

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tom PilitowskiNature of Debt (Purpose):
Advertising

Mailing Address 3280-55A Tamiami Trail #297

City State ZIP Code
Port Charlotte FL 33952

Outstanding Balance Beginning This Period

19.50

Transaction ID: SD10.19581

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.50

1) SUBTOTALS This Period This Page (optional).....

58.50

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Roger PopeNature of Debt (Purpose):
Ballot access petitioning

Mailing Address 1916-C Wilmette Ave

City State ZIP Code
Wilmette IL 60091

Outstanding Balance Beginning This Period

726.00

Transaction ID: SD10.37009

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

726.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Prospect TechNature of Debt (Purpose):
Network and Telephone Sys-
tems Maintenanc

Mailing Address 3246 Prospect St NW

City State ZIP Code
Washington DC 20007

Outstanding Balance Beginning This Period

749.00

Transaction ID: SD10.177686

Amount Incurred This Period

0.00

Payment This Period

749.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Prospect TechNature of Debt (Purpose):
Network and Telephone Sys-
tems Maintenanc

Mailing Address 3246 Prospect St NW

City State ZIP Code
Washington DC 20007

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180626

Amount Incurred This Period

5419.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5419.00

1) SUBTOTALS This Period This Page (optional).....

6145.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
QUI1 - Quill CorporationNature of Debt (Purpose):
Office Supplies

Mailing Address PO Box 94081

City State ZIP Code
Palatine IL 60094-4801

Outstanding Balance Beginning This Period

201.40

Transaction ID: SD10.171295

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

201.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Richard RiderNature of Debt (Purpose):
Advertising

Mailing Address 10969 Red Cedar Dr

City State ZIP Code
San Diego CA 92131-1306

Outstanding Balance Beginning This Period

137.50

Transaction ID: SD10.34465

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

137.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Steve RosaNature of Debt (Purpose):
Non Candidate Desktop Pub-
lishing Service

Mailing Address 4829 West Braddock Road, Apt 3

City State ZIP Code
Alexandria VA 22311

Outstanding Balance Beginning This Period

457.50

Transaction ID: SD10.177687

Amount Incurred This Period

0.00

Payment This Period

457.50

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

338.90

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Steve RosaNature of Debt (Purpose):
LP Annual Report Non Cand-
idate

Mailing Address 4829 West Braddock Road, Apt 3

City State ZIP Code
Alexandria VA 22311

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180627

Amount Incurred This Period

487.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

487.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
State Farm Insurance ComNature of Debt (Purpose):
Insurance

Mailing Address PO Box 680001

City State ZIP Code
Dallas TX 75368-0001

Outstanding Balance Beginning This Period

447.00

Transaction ID: SD10.171257

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

447.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Corey SternNature of Debt (Purpose):
Advertising

Mailing Address 7708 Arboretum Village Cir.

City State ZIP Code
Chanhassen MN 55317-4426

Outstanding Balance Beginning This Period

48.75

Transaction ID: SD10.32992

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

48.75

1) SUBTOTALS This Period This Page (optional).....

983.25

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Corey SternNature of Debt (Purpose):
Advertising

Mailing Address 7708 Arboretum Village Cir.

City State ZIP Code
Chanhassen MN 55317-4426

Outstanding Balance Beginning This Period

48.75

Transaction ID: SD10.32993

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

48.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Corey SternNature of Debt (Purpose):
Advertising

Mailing Address 7708 Arboretum Village Cir.

City State ZIP Code
Chanhassen MN 55317-4426

Outstanding Balance Beginning This Period

48.75

Transaction ID: SD10.32994

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

48.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Telecompute CorporationNature of Debt (Purpose):
Telephone Service

Mailing Address P.O. Box 106019

City State ZIP Code
Atlanta GA 30348-6019

Outstanding Balance Beginning This Period

70.13

Transaction ID: SD10.171296

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

70.13

1) SUBTOTALS This Period This Page (optional).....

167.63

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Telecompute CorporationNature of Debt (Purpose):
Telephone Service

Mailing Address P.O. Box 106019

City State ZIP Code
Atlanta GA 30348-6019

Outstanding Balance Beginning This Period

63.99

Transaction ID: SD10.175116

Amount Incurred This Period

0.00

Payment This Period

63.99

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Telecompute CorporationNature of Debt (Purpose):
Telephone Service

Mailing Address P.O. Box 106019

City State ZIP Code
Atlanta GA 30348-6019

Outstanding Balance Beginning This Period

59.11

Transaction ID: SD10.175173

Amount Incurred This Period

0.00

Payment This Period

59.11

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Telecompute CorporationNature of Debt (Purpose):
Telephone Service

Mailing Address P.O. Box 106019

City State ZIP Code
Atlanta GA 30348-6019

Outstanding Balance Beginning This Period

61.09

Transaction ID: SD10.177688

Amount Incurred This Period

0.00

Payment This Period

61.09

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

0.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Telecompute CorporationNature of Debt (Purpose):
Telephone Service

Mailing Address P.O. Box 106019

City State ZIP Code
Atlanta GA 30348-6019

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180628

Amount Incurred This Period

52.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

52.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tri-StateNature of Debt (Purpose):
Printing Services Non Can-
didateMailing Address Attn: Nancy/David
6900 Faigle RoadCity State ZIP Code
Beltville MD 20705

Outstanding Balance Beginning This Period

65.00

Transaction ID: SD10.110805

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

65.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tri-StateNature of Debt (Purpose):
Printing Services Non Can-
didateMailing Address Attn: Nancy/David
6900 Faigle RoadCity State ZIP Code
Beltville MD 20705

Outstanding Balance Beginning This Period

564.80

Transaction ID: SD10.175117

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

564.80

1) SUBTOTALS This Period This Page (optional).....

682.05

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tri-StateNature of Debt (Purpose):
Printing Services Non Can-
didateMailing Address Attn: Nancy/David
6900 Faigle RoadCity State ZIP Code
Beltsville MD 20705

Outstanding Balance Beginning This Period

2189.25

Transaction ID: SD10.175174

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2189.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Unity DesignNature of Debt (Purpose):
Convention Logo Design

Mailing Address 13201 Amarillo Avenue

City State ZIP Code
Austin TX 78729

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180629

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
US LECNature of Debt (Purpose):
Telephone and Data Servic-
es

Mailing Address PO Box 60130

City State ZIP Code
Charlotte NC 28260-1310

Outstanding Balance Beginning This Period

475.51

Transaction ID: SD10.175118

Amount Incurred This Period

0.00

Payment This Period

475.51

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

2689.25

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
US LECNature of Debt (Purpose):
Data and Telephone Services

Mailing Address PO Box 60130

City State ZIP Code
Charlotte NC 28260-1310

Outstanding Balance Beginning This Period

1104.15

Transaction ID: SD10.177693

Amount Incurred This Period

0.00

Payment This Period

550.00

Outstanding Balance at Close of This Period

554.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
US LECNature of Debt (Purpose):
Telecom and Data Services

Mailing Address PO Box 60130

City State ZIP Code
Charlotte NC 28260-1310

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180631

Amount Incurred This Period

552.39

Payment This Period

0.00

Outstanding Balance at Close of This Period

552.39

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Walton PressNature of Debt (Purpose):
Printing/Mailing Non CandidateMailing Address 402 Mayfield Dr
PO Box 966City State ZIP Code
Monroe GA 30655

Outstanding Balance Beginning This Period

2115.74

Transaction ID: SD10.175175

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2115.74

1) SUBTOTALS This Period This Page (optional).....

3222.28

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Walton PressNature of Debt (Purpose):
Non Candidate Printing/Ma-
ilingMailing Address 402 Mayfield Dr
PO Box 966City State ZIP Code
Monroe GA 30655

Outstanding Balance Beginning This Period

3328.43

Transaction ID: SD10.177689

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3328.43

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WAR1 - Warner, Norcross & JuddNature of Debt (Purpose):
Legal ServicesMailing Address 111 Lyon St NW
Fith Third Center STE #900City State ZIP Code
Grand Rapids MI 49503-2487

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.175176

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WAR1 - Warner, Norcross & JuddNature of Debt (Purpose):
Legal ServicesMailing Address 111 Lyon St NW
Fith Third Center STE #900City State ZIP Code
Grand Rapids MI 49503-2487

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.177690

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional).....

8328.43

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Libertarian National Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
WAR1 - Warner, Norcross & JuddNature of Debt (Purpose):
Legal ServicesMailing Address 111 Lyon St NW
Fifth Third Center STE #900City State ZIP Code
Grand Rapids MI 49503-2487

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.180632

Amount Incurred This Period

2694.69

Payment This Period

0.00

Outstanding Balance at Close of This Period

2694.69

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Washington Pension CenterNature of Debt (Purpose):
401 K Plan Fee

Mailing Address 7315 Wisconsin Ave Ste 500 West

City State ZIP Code
Bethesda MD 20814-3206

Outstanding Balance Beginning This Period

100.00

Transaction ID: SD10.175121

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

1) **SUBTOTALS** This Period This Page (optional).....

2794.69

2) **TOTALS** This Period (last page this line number only).....

139525.06

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Form/Schedule: **F3XA**

Transaction ID:

Please note the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate. 2) The Libertarian National Committee's (LNC) current 'Best Efforts' procedures for ascertaining contributor information result in from 87% to 90% compliance from contributors. The Committee requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR §104.7(b)(-1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is corrected in a subsequent amendment. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule: **SD9**

(Current loan balance of 20.00 has been forgiven) (A previous settlement of 20.00 has been rescinded)

Transaction ID: **SD9.15703**

Image# 26970076289

Form/Schedule:SD10 A credit of \$24,188.93 has been issued by the vendor as settlement for disputed charges on this account, resulting in a reduction of the current debt balance of \$1,365.19.
Transaction ID: SD10.130069
